WHISPERING OAKS CARE CENTER

620 HARPER AVENUE

PESHTIGO 54157 Phone: (715) 582-4148	}	Ownership:	Limited Liability Company
Operated from 1/1 To 12/31 Days of Operation:	365	Highest Level License:	Skilled
Operate in Conjunction with Hospital?	No	Operate in Conjunction with CBRF?	No
Number of Beds Set Up and Staffed (12/31/05):	45	Title 18 (Medicare) Certified?	Yes
Total Licensed Bed Capacity (12/31/05):	45	Title 19 (Medicaid) Certified?	Yes
Number of Residents on 12/31/05:	31	Average Daily Census:	31

Age, Gender, and Primary Diagnosis	Length of Stay (12/31/05)	%						
Primary Diagnosis	<del></del> १	Age Groups 	*	   Less Than 1 Year   1 - 4 Years	32.3 29.0			
Developmental Disabilities	0.0	Under 65	12.9	More Than 4 Years	38.7			
Mental Illness (Org./Psy)	3.2	65 - 74	25.8	İ				
Mental Illness (Other)	16.1	75 - 84	25.8		100.0			
Alcohol & Other Drug Abuse	0.0	85 - 94	32.3					
Para-, Quadra-, Hemiplegic	3.2	95 & Over	3.2	Full-Time Equivalent				
Cancer	er 3.2			Nursing Staff per 100 Residents				
Fractures	6.5		100.0	(12/31/05)				
Cardiovascular	38.7	65 & Over	87.1					
Cerebrovascular	6.5			RNs	9.8			
Diabetes	6.5	Gender	%	LPNs	21.7			
Respiratory	9.7			Nursing Assistants,				
Other Medical Conditions	6.5	Male	51.6	Aides, & Orderlies	37.5			
		Female	48.4	İ				
	100.0	İ		İ				
		İ	100.0					

## Method of Reimbursement

		edicare itle 18			Medicaid 'itle 19			Other			Private Pay	2		amily Care		1	Managed Care	<u>l</u>		
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	- Of
Int. Skilled Care	0	0.0	0	2	8.0	145	1	50.0	156	0	0.0	0	0	0.0	0	0	0.0	0	3	9.7
Skilled Care	0	0.0	0	23	92.0	125	1	50.0	133	3	100.0	118	0	0.0	0	1	100.0	211	28	90.3
Intermediate				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depende:	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	0	0.0		25	100.0		2	100.0		3	100.0		0	0.0		1	100.0		31	100.0

Admissions, Discharges, and		Percent Distribution	of Residents'	Condit	ions, Services, an	d Activities as of 12/	/31/05
Deaths During Reporting Period		 		Total			
Percent Admissions from:		Activities of	%		% Needing sistance of	% Totally	Number of
Private Home/No Home Health	11.1	Daily Living (ADL)	Independent	One	Or Two Staff	Dependent	Residents
Private Home/With Home Health	5.6	Bathing	12.9		80.6	6.5	31
Other Nursing Homes	22.2	Dressing	35.5		61.3	3.2	31
Acute Care Hospitals	61.1	Transferring	48.4		41.9	9.7	31
Psych. HospMR/DD Facilities	0.0	Toilet Use	45.2		48.4	6.5	31
Rehabilitation Hospitals	0.0	Eating	80.6		16.1	3.2	31
Other Locations	0.0	******	******	*****	* * * * * * * * * * * * * * * * * *	******	******
Total Number of Admissions	18	Continence		ક	Special Treatmen	ts	8
Percent Discharges To:		Indwelling Or Extern	al Catheter	6.5	Receiving Resp	iratory Care	16.1
Private Home/No Home Health	21.1	Occ/Freq. Incontiner	ıt of Bladder	61.3	Receiving Trac	heostomy Care	3.2
Private Home/With Home Health	5.3	Occ/Freq. Incontiner	it of Bowel	38.7	Receiving Suct	ioning	3.2
Other Nursing Homes	21.1	į			Receiving Osto	my Care	6.5
Acute Care Hospitals	5.3	Mobility			Receiving Tube	Feeding	6.5
Psych. HospMR/DD Facilities	0.0	Physically Restraine	ed.	12.9	Receiving Mech	anically Altered Diets	45.2
Rehabilitation Hospitals	0.0	<u> </u>				_	
Other Locations	0.0	Skin Care			Other Resident C	haracteristics	
Deaths	42.1	With Pressure Sores		3.2	Have Advance D	irectives	35.5
Total Number of Discharges		With Rashes		6.5	Medications		
(Including Deaths)	19	İ			Receiving Psyc	hoactive Drugs	54.8

Selected Statistics: This Facility Compared to All Similar Urban Area Facilities & Compared to All Facilities

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		Own	ership:	Bed	Size:	Lic	ensure:				
	This	Pro	prietary	Und	er 50	Ski	lled	Al	1		
	Facility	Facility Peer Gro		Peer Grou		Peer Group		Faci	lities		
	%	%	Ratio	%	Ratio	%	Ratio	%	Ratio		
Ogginancy Pata: Average Pails Congret/Liganeed Pada	60 0	06 0	0.79	00 0	0.78	88.3	0.78	00 1	0.78		
Occupancy Rate: Average Daily Census/Licensed Beds	68.9	86.8		88.2				88.1			
Current Residents from In-County	71.0	76.7	0.92	70.9	1.00	70.5	1.01	77.6	0.91		
Admissions from In-County, Still Residing	38.9	16.9	2.30	24.7	1.58	20.5	1.90	18.1	2.15		
Admissions/Average Daily Census	58.1	168.8	0.34	96.3	0.60	123.5	0.47	162.3	0.36		
Discharges/Average Daily Census	61.3	172.6	0.36	93.9	0.65	126.7	0.48	165.1	0.37		
Discharges To Private Residence/Average Daily Census	16.1	69.5	0.23	23.2	0.70	50.1	0.32	74.8	0.22		
Residents Receiving Skilled Care	100	95.0	1.05	83.0	1.20	94.1	1.06	92.1	1.09		
Residents Aged 65 and Older	87.1	92.7	0.94	96.4	0.90	92.5	0.94	88.4	0.99		
Title 19 (Medicaid) Funded Residents	80.6	67.3	1.20	53.3	1.51	70.2	1.15	65.3	1.23		
Private Pay Funded Residents	9.7	18.0	0.54	37.0	0.26	19.0	0.51	20.2	0.48		
Developmentally Disabled Residents	0.0	0.6	0.00	1.2	0.00	0.5	0.00	5.0	0.00		
Mentally Ill Residents	19.4	29.4	0.66	30.9	0.63	37.2	0.52	32.9	0.59		
General Medical Service Residents	6.5	28.0	0.23	12.7	0.51	23.8	0.27	22.8	0.28		
Impaired ADL (Mean)	32.3	48.0	0.67	46.1	0.70	47.2	0.68	49.2	0.66		
Psychological Problems	54.8	53.5	1.03	64.2	0.70	58.9	0.93	58.5	0.94		
Nursing Care Required (Mean)	11.3	6.8	1.66	9.2	1.23	7.1	1.59	7.4	1.52		